

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted Declaration Submitted after Initial With Initial Filing
OR
Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	US030490
First Named Inventor	William L. Keith
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art-Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ELECTRONIC BALLAST WITH LAMP TYPE DETERMINATION

the specification of which (Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) [redacted] as United States Application Number or PCT International

Application Number [redacted] and was amended on (MM/DD/YYYY) [redacted] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
or Bar Code Label •24737• OR Correspondence address below

Philips Electronics North America Corporation

Name

Address

City	State	ZIP
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U.S.A.	(914)332-0222	(914) 332-0615
Country	Telephone	Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name William L. (first and middle [if any])	Family Name Keith or Surname
--	---------------------------------

Inventor's Signature <i>William L. Keith</i>	Date 3/5/04
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Residence: City Elmhurst Lake in the Hills <i>IL</i>	State IL	USA	USA
Residence: City	Country	Citizenship	

Mailing Address 810 Lorraine Avenue 3766 Sonoma Circle <i>IL</i>			
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Residence: City Elmhurst Lake in the Hills <i>IL</i>	State IL	Zip 60126-60156	USA
City	State	Zip	Country

NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------	---

Given Name George L. (first and middle [if any])	Family Name Grouev or Surname
---	----------------------------------

Inventor's Signature <i>G. Grouev</i>	Date 3/5/2004
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Residence: City Arlington Heights <i>IL</i>	State IL	USA	Bulgaria
Residence: City	Country	Citizenship	

Mailing Address 979 W. Happfield Drive			
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Residence: City Arlington Heights <i>IL</i>	State IL	Zip 60004	USA
City	State	Zip	Country

<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.
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Please type a plus sign (+) inside this box →

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1**

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Kent E.	Crouse		
Inventor's Signature	<i>Kent E. Crouse</i>		Date March 5, 2004
Residence: City	Carpentersville	State	IL
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Citizenship	USA		
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Carpentersville	State	Country	USA
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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